## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or  $\underline{\underline{\mathcal{D}}}$ ocket Number

10697828

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   |              |                       | (Column 2)                            |                  | SMALL ENTITY TYPE   |                        | OR  | OTHER THAN<br>OR SMALL ENTITY |                        |
|---|--|---|--------------|-----------------------|---------------------------------------|------------------|---------------------|------------------------|-----|-------------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 29           |                       |                                       |                  | RATE                | FEE                    |     | RATE                          | FEE                    |
| FOR NUMB  |  |   |              | FILED                 | NUMBER EXTRA                          |                  | BASIC FEE           | 385.00                 | OR  | BASIC FEE                     | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 29 minus 20= |                       | * 9                                   |                  | X\$ 9=              |                        | OR  | X\$18=                        | 162                    |
| INDEPENDENT CLAIMS  |  |   | / mi         | / minus 3 =           |                                       |                  | X43=                |                        | OR  | X86=                          |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |              |                       |                                       |                  | +145=               |                        | OR  | +290=                         |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |              |                       | r "0" in c                            | olumn 2          | TOTAL               |                        | OR  | TOTAL                         | 932                    |
| CLAIMS AS AMENDED - PART I (Column 1) (Column   |  |   |              |                       |                                       | (Column 3)       | SMALL E             | NTITY                  | OR  | OTHER<br>SMALL                |                        |
| AMENDMENT A   |  | CLAIMS REMAINING AFTER AMENDMENT            |              | HIGH<br>NUM<br>PREVIO | IEST<br>BER<br>OUSLY                  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                    |                                       | =                | X\$ 9=              |                        | OR  | X\$18=                        |                        |
|   | Independent                                    | *   | Minus        | ***                   |                                       | =                | X43=                |                        | OR  | X86=                          |                        |
| ⋖   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                       |                                       |                  | +145=               |                        | OR  | +290=                         |                        |
|   |  |   |              |                       |                                       |                  | TOTAL<br>ADDIT. FEE |                        | اما | TOTAL<br>ADDIT. FEE           |                        |
|   |  | (Column 3)                                  | ADDIT. I CE  |                       | _                                     |                  |                     |                        |     |                               |                        |
| AMENDMENT B   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | HIGH<br>NUM<br>PREVI  | MN 2)<br>HEST<br>IBER<br>OUSLY<br>FOR | PRESËNT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                    |                                       | =                | X\$ 9=              |                        | OR  | X\$18=                        |                        |
|   | Independent                                    | *   | Minus        | ***                   |                                       | =                | X43=                |                        | OR  | X86=                          |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                       | TCLAIM                                |                  | +145=               | ·                      | OR  | +290=                         |                        |
|   |  |   |              |                       |                                       |                  | TOTAL<br>ADDIT. FEE |                        | 1   | TOTAL<br>ADDIT. FEE           |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |              |                       |                                       |                  |                     |                        |     |                               |                        |
| AMENDMENT C   |  | CLAIMS REMAINING AFTER AMENDMENT            |              | HIGI<br>NUN<br>PREVI  | HEST<br>MBER<br>IOUSLY<br>D FOR       | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                    |                                       | = .              | X\$ 9=              |                        | OR  | X\$18=                        |                        |
|   | Independent                                    | *   | Minus        | ***                   |                                       | =                | X43=                |                        | OR  | X86=                          |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |   |              |                       | IT CLAIN                              | 1                | +145=               |                        | OR  | +290=                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |              |                       |                                       |                  |                     |                        |     |                               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |                       |                                       |                  |                     |                        |     |                               |                        |